

**This Form is for INTERNAL PTO USE ONLY**  
**It does NOT get mailed to the applicant.**

**NOTICE OF FILING / CLAIM FEE(S) DUE**  
**(CALCULATION SHEET)**

APPLICATION NUMBER: 09/ 075392

**Total Fee Calculation**

Fee Code	Total # Claims	Number Extra	X	Fee	Fee	=	Total
Sm./Lg.				Sm. Entity	Lg. Entity		
Basic Filing Fee	<u>201/101</u>					=	<u>790</u>
Total Claims >20	<u>203/103</u>	<u>40</u>	-20 =	<u>20</u>	X		<u>440</u>
Independent Claims >3	<u>202/102</u>	<u>8</u>	-3 =	<u>5</u>	X		<u>410</u>
Mult. Dep Claim Present	<u>204/104</u>					=	
Surcharge	<u>205/105</u>					=	<u>130</u>
English Translation	<u>139</u>					=	
<b><u>TOTAL FEE CALCULATION</u></b>							<u>1770.00</u>

Fees due upon filing the application:

Total Filing Fees Due = \$ 1770.00

Less Filing Fees Submitted - \$ \_\_\_\_\_

BALANCE DUE = \$ 1770.00

Kim Duncan  
Office of Initial Patent Examination

Figure 7

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 1997

Application or Docket Number

09/075392

## CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE		
TOTAL CLAIMS	40 minus 20 =	* 20
INDEPENDENT CLAIMS	8 minus 3 =	* 5
MULTIPLE DEPENDENT CLAIM PRESENT		

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY TYPE ☐

OR

OTHER THAN SMALL ENTITY

RATE	FEE
	395.00
x\$11=	
x41=	
+135=	
TOTAL	

OR

RATE	FEE
	790.00
x\$22=	440
x82=	460
+270=	
TOTAL	1660

## CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total * 35 Minus ** 40 =		
Independent * 9 Minus *** 8 =			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

SMALL ENTITY

OR

OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
x\$11=	
x41=	
+135=	
TOTAL ADDIT. FEE	

OR

RATE	ADDITIONAL FEE
x\$22=	
x82=	
+270=	
TOTAL ADDIT. FEE	

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total * 37 Minus ** 40 =		
Independent * 9 Minus *** 9 =			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

RATE	ADDITIONAL FEE
x\$11=	
x41=	
+135=	
TOTAL ADDIT. FEE	

OR

RATE	ADDITIONAL FEE
x\$22=	
x82=	
+270=	
TOTAL ADDIT. FEE	

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total * Minus ** =		
Independent * Minus *** =			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			

RATE	ADDITIONAL FEE
x\$11=	
x41=	
+135=	
TOTAL ADDIT. FEE	

OR

RATE	ADDITIONAL FEE
x\$22=	
x82=	
+270=	
TOTAL ADDIT. FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.